Best Available Copy

Application or Docket Number

Effective October 1, 2001								CS 11008					
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE OR				R THAN	
TOTAL CLAIMS				3				RATE		7	RATE	FEE	
F	OR	NUMBE	NUMBER FILED		NUMBER EXTRA		CFEE	FEE 370.00		BASIC FE			
T	OTAL CHARGE	22 m	⊇ ⊋ minus 20=		* 3		X\$ 9=		7		740.00		
INDEPENDENT CLAIMS			1	4 minus 3 =		* 1					X\$18=	24	
MULTIPLE DEPENDENT CLAIM PR					/-		X4	2=	ļ	OR	X84=	જેપ	
* 1	the difference						+140=			OR	+280=		
. 1				less than zero, enter "0" in column 2				TOTAL		OR	TOTAL	878	
CLAIMS AS AMENDED - PART II											OTHER	RTHAN	
		(Column 1) CLAIMS		(Colur HIGH		(Column 3)	SMA	\LL I	ENTITY	OR	SMALL	ENTITY	
AMENDMENT A		REMAINING AFTER AMENDMENT		PREVIO PAID	DUSLY	PRESENT EXTRA	RA	E	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=	X\$:	9=		OR	X\$18=		
	Independent	*	Minus	***		=	X42	_		1 1	X84=		
	FIRST PRES	ENTATION OF M	ULTIPLE DE	PENDENT	CLAIM			\dashv	 	OR		 	
							+140			OR	+280≈		
		(Calumn 4)					ADDIT.	TAL EE		OR ,	TOTAL ADDIT. FEE		
6		(Column 1) CLAIMS	Section Sections 4	(Colum	ST	(Column 3)							
AMENDMENT B		REMAINING AFTER AMENDMENT	and the second second and the second	NUMB PREVIO PAID F	USLY	PRESENT EXTRA	RAT	Ε	ADDI- FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=	X\$ 9	. [OR	X\$18=		
	Independent	*	Minus	***		=	X42:			ŀ	X84=		
	FINST PRESE	NTATION OF MU	ILTIPLE DEI	PENDENT	CLAIM		 	+		OR			
							+140	L		OR	+280≐		
		40.4					TOT ADDIT, F			OR A	TOTAL DDIT. FEE		
		(Column 1) CLAIMS		(Columi HIGHE		(Column 3)							
MEN	Karisalda (1) digirla	REMAINING AFTER AMENDMENT		NUMBE PREVIOL PAID FO	ER JSLY	PRESENT EXTRA	RATE		ADDI- IONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=	X\$ 9=			ا م	X\$18=	166	
	Independent		Minus	***		=	X42=	+		OR			
	HIRST PRESE	NTATION OF MU	LTIPLE DEP	PENDENT (CLAIM		A42=	+		OR	X84=		
• If	the entry in colur	nn 1 is less than the	entry in colu	mn 2 weita "	n" in activ	.ma 2	+140=		· ·	OR	+280=		
***!	the "Highest Nur	nber Previously Pai nber Previously Pai	d For" IN THIS d For" IN THIS	SPACE is I	ess than	20, enter "20."	TOTA ADDIT. FE	E L		OR A	TOTAL DDIT. FEE		
T	ne "Highest Num	ber Previously Paid	For" (Total or	Independent	ess man t) is the t	ighest number f			priate box	in colur	nn 1.		